

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	WIP TADG	73 4/26/01	04-24-01
FORMALITY REVIEW	WTS	954	5/10/01
RESPONSE FORMALITY REVIEW	WTS	1091	8-13-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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BEFORE AVAILABLE COPY

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 5/1/01  
 De-5  
 76-612  
 8-13-01